INTERNET FORM NLRB-501

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	FORM EXEMPT UNDER 44 U.S.C 3512		
DO NOT WRITE IN THIS SPACE			
Case	Date Filed		
13-CA-252370	11/25/10		

INSTRUCTIONS:		13-CA-25237	9	11/25/19
File an original with NLRB Regional Director for the region in which the	e alleged unfair labor prac	tice occurred or is occurri	ng.	•
	GAINST WHOM CHA	RGE IS BROUGHT	1	
Name of Employer     Darren A Freihage, LLC (McDonalds)			D. 16	el. No. (815) 469-6300
			c. Co	ell No.
	- Frankrian Danasan	4-4:	f. Fa	ax No.
d. Address (Street, city, state, and ZIP code)	e. Employer Represer	liative	g. e-	-Mail
21011 S La Grange Road				
IL Frankfort 60423-1335			h. N	lumber of workers employed
				60
<ul> <li>Type of Establishment (factory, mine, wholesaler, etc.)</li> <li>Restaurants</li> </ul>	<ul> <li>j. Identify principal product or service fast food (Mcdonald's)</li> </ul>			
k. The above-named employer has engaged in and is engaging	in unfair labor practices	within the meaning of sec	tion 8(a)	, subsections (1) and (list
subsections)		of the National Lab	or Relati	ons Act, and these unfair labor
practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization A	-	fair labor practices are un	fair prac	tices affecting commerce
2. Basis of the Charge (set forth a clear and concise statement of	of the facts constituting t	he alleged unfair labor pr	actices)	
See additional page				
, 5				
3. Full name of party filing charge (if labor organization, give full	name, including local na	ame and number)		
(b) (6), (b) (7)(C) Title:				
4a. Address (Street and number, city, state, and ZIP code)			4b. Tel.	No. (b) (6), (b) (7)(C)
			4c. Cell	
(b) (6), (b) (7)(C)			41. 5	
·			4d. Fax	x No.
			4e. e-M	
				(b) (6), (b) (7)(C)
<ol><li>Full name of national or international labor organization of whorganization)</li></ol>	nich it is an affiliate or co	nstituent unit (to be filled	n when	charge is filed by a labor
DECLARATION  I declare that I have read the above charge and that the statements	are true to the best of my k	knowledge and belief.	Tel. No	(b) (6), (b) (7)(C)
(D) (O), (D) (7)(C)	(b) (6), (b) (7)(C)		Office, i	if any, Cell No.
By Title.	(Print/type name and title or	office, if any)	Fax No	ı <u>.</u>
			o Mail	
(b) (6), (b) (7)(C)		11/25/2019 12:48:02	e-Mail	(b) (6), (b) (7)(C)
Address		(date)		(D)(D), (D)(I)(D)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

# **Basis of the Charge**

### 8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by maintaining work rules that prevent or discourage employees from engaging in protected concerted activities.

concerted activities.		
Work Rule		
did not want me to discuss hours,wages		
did not want to discuss abusive behavior.		
unwilling to train me for better opportunity.		
allowed employee to discriminate on social media		
allowed managers to discriminate and abuse		

### **Additional Information in Support of Charge**

Charging Party Name : (b) (6), (b) (7)(C)

Inquiry Number : (b) (6), (b) (7)(C)

Date Submitted: 11/25/2019 12:48:02

Please provide a <u>brief</u> description of the specific conduct involved in your charge. The information you provide may be viewed by the charged party in the event of a formal proceeding, so PLEASE DO NOT GIVE A DETAILED ACCOUNT OF YOUR CHARGE OR A LIST OF POTENTIAL WITNESSES AT THIS TIME. A Board Agent will contact you to obtain this and other detailed information after your charge is docketed. After you submit this E-Filed Charge form, you will receive a confirmation email with an Inquiry Number (Sample Inquiry Number: 1-1234567890) and a link to the E-Filing web page. You may use the link and the Inquiry number provided in the email to e-file any additional documents you wish to present in support of your charge.

#### **Additional Information Provided:**

(b) (6), (b) (7)(C) fired me because i wanted to discuss my hours and wages,

(b) (6), (b) (7)(C) continued to use abusive languages at me and other co-workers.

(b) (6), (b) (7)(C) refused to train me and for the same opportunity given to other employee's

(b) (6), (b) (7)(C) allowed employee to discuss my termination of employment on social media.

(b) (6), (b) (7)(C) made racial remarks against me regarding age and health.



# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 13 Dirksen Federal Building 219 South Dearborn Street, Suite 808 Chicago, IL 60604-2027

Agency Website: www.nlrb.gov Telephone: (312)353-7570 Fax: (312)886-1341 Download NLRB Mobile App

November 25, 2019

Darren A Freihage, LLC (McDonalds) 21011 South La Grange Road Frankfort, IL 60423-1335

Re: Darren A Freihage, LLC (McDonalds)

Case 13-CA-252379

#### Dear Sir or Madam:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner Jay B. Greenhill whose telephone number is (312)353-7628 and e-mail address is <u>jay.greenhill@nlrb.gov</u>. If this Board agent is not available, you may contact Supervisory Field Examiner Paul Prokop whose telephone number is (312)353-7171.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <u>www.nlrb.gov</u>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge by December 9, 2019. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not

enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

**Procedures:** Pursuant to Section 102.5 of the Board's Rules and Regulations, parties must submit all documentary evidence, including statements of position, exhibits, sworn statements, and/or other evidence, by electronically submitting (E-Filing) them through the Agency's web site (www.nlrb.gov). You must e-file all documents electronically or provide a written statement explaining why electronic submission is not possible or feasible. Failure to comply with Section 102.5 will result in rejection of your submission. The Region will make its determination on the merits solely based on the evidence properly submitted. All evidence submitted electronically should be in the form in which it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format). If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge.

If the Agency does not issue a formal complaint in this matter, parties will be notified of the Regional Director's decision by email. Please ensure that the agent handling your case has your current email address.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Peter Sung Ohr Regional Director

JBG/dg Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

	3/21/2011	NATIONAL LABOR REI	LATIONS	BOARD			
	QI	JESTIONNAIRE ON COMME	RCE IN	FORMATION			
Please rea	nd carefully, answer all applicable it	ems, and return to the NLRB Office. If add	itional spa	ce is required, please add a page	and identify item numbe	r.	
CASE NAME  CASE NUMBER							
1 EVAC	13-CA-252379  1. EXACT LEGAL TITLE OF ENTITY (As filed with State and/or stated in legal documents forming entity)						
I. EXAC	T LEGAL TITLE OF ENTITY	(As filed with State and/or stated in leg	gal docum	ents forming entity)			
2. TYI	PE OF ENTITY						
	PORATION [ ] LLC [ ]	LLP [] PARTNERSHIP [] SC	LE PROP	RIETORSHIP [] OTHER	(Specify)		
	CORPORATION or LLC E OF INCORPORATION	B. NAME, ADDRESS, AND RELAT	TONCLID	(o a passet subsidings) OF AT	I DELATED ENTERE	c	
	RMATION	B. NAME, ADDRESS, AND RELAT	IONSHIP	(e.g. parent, subsidiary) OF AL	L KELATED ENTITIE.	3	
4 TF 43	VIII COD ANY TWO OF DAD	THE POINT FILL NAME AND ADD	DECC OF	ALL MEMBERS OF BARTS	VEDG		_
4. IF A	VLLC OR ANY TYPE OF PAR	TNERSHIP, FULL NAME AND ADD	KESS OF	ALL MEMBERS OR PARTS	NEKS		
5. IF A	SOLE PROPRIETORSHIP, FU	LL NAME AND ADDRESS OF PROP	RIETOR				
4							
6. BRIE	CFLY DESCRIBE THE NATUR	E OF YOUR OPERATIONS (Products	handled o	or manufactured, or nature of se	rvices performed).		
7. A. P	RINCIPAL LOCATION:	B. BRANCH I	OCATIO	NS:			
8. NUM	BER OF PEOPLE PRESENTL	Y EMPLOYED					
Α. 7	Total:	B. At the address involved in thi	s matter:				
9. DUR	ING THE MOST RECENT (Ch	eck appropriate box): [ ] CALENDAR	YR []]	12 MONTHS or [ ] FISCAL	L YR (FY dates		)
A Did.	rou muorido comitos volvod in	areass of \$50,000 directly to system		do yraya Stato? If no indicat	to actual realisa	YES	NO
A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value.							
\$		_		•			
B. If yo	u answered no to 9A, did you	provide services valued in excess of	\$50,000	to customers in your State w	ho purchased goods		
B. If yo		provide services valued in excess of irectly outside your State? If no, inc					
B. If yo value	ed in excess of \$50,000 from d	irectly outside your State? If no, inc	icate the	value of any such service	es you provided.		
B. If yo value \$ C. If yo	ed in excess of \$50,000 from d u answered no to 9A and 9B, di	rectly outside your State? If no, inc d you <b>provide services</b> valued in ex	icate the	value of any such service 50,000 to public utilities, tran	es you provided.		
B. If yo value \$ C. If yo news less t	ed in excess of \$50,000 from d u answered no to 9A and 9B, di papers, health care institutions han \$50,000, indicate amount.	d you <b>provide services</b> valued in ex, broadcasting stations, commercial	icate the	value of any such service 50,000 to public utilities, tran- educational institutions, or	es you provided.  nsit systems, retail concerns? If		
B. If yo value \$ C. If yo news less t D. Did y	ed in excess of \$50,000 from d u answered no to 9A and 9B, di papers, health care institutions han \$50,000, indicate amount. you sell goods valued in excess	d you <b>provide services</b> valued in ex, broadcasting stations, commercial	icate the	value of any such service 50,000 to public utilities, tran- educational institutions, or	es you provided.  nsit systems, retail concerns? If		
B. If yo value \$ C. If yo news less t D. Did y amou	ed in excess of \$50,000 from deal in excess of \$50,000 from deal in answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount, you sell goods valued in excessint. \$	d you <b>provide</b> services valued in ex, broadcasting stations, commercial s	cess of \$5 ouildings,	value of any such service 50,000 to public utilities, tran- educational institutions, or side your State? If less than \$	es you provided.  nsit systems, retail concerns? If		
B. If yo value \$ C. If yo news less to Did y amou	answered no to 9A and 9B, di papers, health care institutions than \$50,000, indicate amount. you sell goods valued in excess int. \$ u answered no to 9D, did you	d you <b>provide</b> services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly goods <b>goods</b> yalued in excess goods <b>goods</b> yalued <b></b>	cess of \$5 puildings, cated outs	value of any such service 50,000 to public utilities, tran- educational institutions, or side your State? If less than \$2.50 to customers located inside	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate		
B. If you value \$ C. If you news less to Did yamou E. If you purel \$	u answered no to 9A and 9B, di papers, health care institutions than \$50,000, indicate amount. you sell goods valued in excess int. \$ u answered no to 9D, did you hased other goods valued in ex	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 cess of \$50,000 from directly outside	cess of \$5 couldings, cated outs 0 directly your Sta	value of any such service 50,000 to public utilities, tran- educational institutions, or side your State? If less than \$ 7 to customers located inside tte? If less than \$50,000, inc	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate  e your State who dicate amount.		
B. If you value \$ C. If you news less to Did you amou E. If you pure! \$ F. Did y	u answered no to 9A and 9B, di papers, health care institutions han \$50,000, indicate amount. you sell goods valued in excess int. \$ u answered no to 9D, did you hased other goods valued in ex-	d you <b>provide</b> services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly to customers located <b>goods</b> valued in excess of \$50,000 directly goods <b>goods</b> yalued in excess goods <b>goods</b> yalued <b></b>	cess of \$5 couldings, cated outs 0 directly your Sta	value of any such service 50,000 to public utilities, tran- educational institutions, or side your State? If less than \$ 7 to customers located inside tte? If less than \$50,000, inc	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate  e your State who dicate amount.		
B. If you value \$ C. If you news less to Did y amou E. If you pure \$ F. Did y amou amou amou amou amou amou amou amou	u answered no to 9A and 9B, di papers, health care institutions han \$50,000, indicate amount. you sell goods valued in excess int. \$ u answered no to 9D, did you hased other goods valued in ex- you purchase and receive good int. \$	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from	cess of \$5 couldings cated outs 0 directly 2 your Sta	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, incoutside your State? If less than \$50,000 to the state?	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate  e your State who dicate amount.  than \$50,000, indicate		
B. If you value \$ C. If you news less to Did your amount from the pure \$ F. Did your amount from the pure \$ G. Did your outsing the pure \$ The	u answered no to 9A and 9B, di papers, health care institutions han \$50,000, indicate amount. you sell goods valued in excess int. \$ u answered no to 9D, did you hased other goods valued in ex- you purchase and receive good int. \$ you purchase and receive good de your State? If less than \$	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from 50,000, indicate amount. \$	cess of \$5 buildings, cated outs 0 directly your Sta directly of enterprise	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, incoutside your State? If less the substitutes who received the goods desired the goods desired.	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate  e your State who dicate amount.  than \$50,000, indicate		
B. If you value \$ C. If you news less to Did your amount for Did your amount for Did yoursing H. Green State of the state	ed in excess of \$50,000 from detail answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount you sell goods valued in excess int. \$ u answered no to 9D, did you hased other goods valued in excess you purchase and receive good int. \$ you purchase and receive good de your State? If less than \$ yous Revenues from all sales or	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from 50,000, indicate amount. \$ performance of services (Check the	cess of \$5 buildings, cated outs 0 directly your Sta directly enterpris	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, inconsidery your State? If less than \$60,000, inconsidery your State?	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate  e your State who dicate amount.  than \$50,000, indicate		
B. If you value \$ C. If you news less to Did yourch \$ F. Did yourch amount of Did yours in the Growth of the Growt	answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount, you sell goods valued in excess int. \$ answered no to 9D, did you shased other goods valued in excess you purchase and receive goods. \$ you purchase and receive goods your state? If less than \$ you sell goods your state? If you sell goods you sell goods your state? If you sell goods you sell goods your state? If you you sell goods you sell goods you sell goods you sell goods you you sell goods you sell goods you sell goods you sell goods you y	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If the	cess of \$5 couldings, cated outs of directly cyour Standirectly directly enterprise largest and	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, inconsidery your State? If less than \$60,000, inconsidery your State?	es you provided.  nsit systems, retail concerns? If  \$50,000, indicate  e your State who dicate amount.  than \$50,000, indicate		
B. If you value \$ C. If you news less to the series of the	answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount.  you sell goods valued in excess that. \$  u answered no to 9D, did you shased other goods valued in excess that a self-self-self-self-self-self-self-self-	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located as a sof \$50,000 from directly outside ds valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If It the last 12 months? If yes, specification is presented as a specific content of the services of the services of \$50,000 or more If It the last 12 months?	cated outs outsets of \$5 outldings, cated outs outsets of directly cated outsets directly dire	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, incourside your State? If less the swho received the goods demount) 100,000, indicate amount.	es you provided.  nsit systems, retail concerns? If \$50,000, indicate e your State who dicate amount.  than \$50,000, indicate lirectly from points		
B. If you value selected amount of the select	answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount. you sell goods valued in excess int. \$ u answered no to 9D, did you hased other goods valued in excess you purchase and receive good int. \$ you purchase and receive good your State? If less than \$ yos Revenues from all sales or \$100,000 [] \$250,000 [] \$ you begin operations within YOU A MEMBER OF AN ASS	d you provide services valued in ex, broadcasting stations, commercial sets of \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If the last 12 months? If yes, specification or other employers.	cated outs outsets of \$5 outldings, cated outs outsets of directly cated outsets directly dire	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, incourside your State? If less the swho received the goods demount) 100,000, indicate amount.	es you provided.  nsit systems, retail concerns? If \$50,000, indicate e your State who dicate amount.  than \$50,000, indicate lirectly from points		
B. If you value \$ C. If you news less to Did yourd \$ F. Did yourd \$ G. Did youtsi H. Ground I. Did ARE	answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount. You sell goods valued in excess int. \$ answered no to 9D, did you hased other goods valued in excess of the self-goods valued in expourable process. \$ and receive goods of the self-goods of the self-goods of the self-goods. \$ and receive goods you purchase and receive goods you purchase and receive goods you purchase and receive goods your State? If less than \$ answered no [] \$250,000 [] \$ answered no goods you begin operations within YOU A MEMBER OF AN ASS	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located as valued in excess of \$50,000 from directly outsided as valued in excess of \$50,000 from directly outsided as valued in excess of \$50,000 from disvalued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If the last 12 months? If yes, specifical address of association or group).	eated outs outlidings	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, inconside your State? If less the putside your State? If less the es who received the goods demount)  100,000, indicate amount.	es you provided.  nsit systems, retail concerns? If \$50,000, indicate e your State who dicate amount.  than \$50,000, indicate lirectly from points		
B. If you value \$ C. If you news less to Did yourd \$ F. Did yourd \$ G. Did youtsi H. Ground I. Did ARE	answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount. You sell goods valued in excess int. \$ answered no to 9D, did you hased other goods valued in excess of the self-good valued in excess of the self-good valued in expour purchase and receive good de your State? If less than \$ answered no to 9D, did you hased other goods valued in expour purchase and receive good de your State? If less than \$ answered no to 9D, did you hased other goods valued in expour purchase and receive good de your State? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before good	d you provide services valued in ex, broadcasting stations, commercial sets of \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If the last 12 months? If yes, specification or other employers.	cess of \$5 couldings, cated outs of directly of the enterprise cess than \$5 cy date:	value of any such service 50,000 to public utilities, transeducational institutions, or side your State? If less than \$7 to customers located inside the? If less than \$50,000, inconside your State? If less the putside your State? If less the es who received the goods demount)  100,000, indicate amount.	es you provided.  nsit systems, retail concerns? If \$50,000, indicate e your State who dicate amount.  than \$50,000, indicate lirectly from points	iG?	
B. If you value should be seen to see the see	answered no to 9A and 9B, dispapers, health care institutions than \$50,000, indicate amount. You sell goods valued in excess int. \$ answered no to 9D, did you hased other goods valued in excess of the self-good valued in excess of the self-good valued in expour purchase and receive good de your State? If less than \$ answered no to 9D, did you hased other goods valued in expour purchase and receive good de your State? If less than \$ answered no to 9D, did you hased other goods valued in expour purchase and receive good de your State? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before any state? If less than \$ answered no to 9D, did you have good before good	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If the last 12 months? If yes, specifical address of association or group).	cess of \$5 couldings, cated outs of directly of the enterprise cess than \$5 cy date:	value of any such service 50,000 to public utilities, tran educational institutions, or side your State? If less than \$ 7 to customers located inside tte? If less than \$50,000, in outside your State? If less the es who received the goods demount) 100,000, indicate amount.  THAT ENGAGES IN COLLI	es you provided.  Insit systems, Instantial concerns? If  \$50,000, indicate  It your State who dicate amount.  In \$50,000, indicate  It is the concerns of the	iG?	
B. If you value should be seen to see the see	answered no to 9A and 9B, dispapers, health care institutions han \$50,000, indicate amount, you sell goods valued in excess int. \$ answered no to 9D, did you hased other goods valued in excess you purchase and receive good your state? If less than \$ cost Revenues from all sales or \$100,000 [] \$250,000 [] \$ answered no you purchase and receive good your State? If less than \$ cost Revenues from all sales or \$100,000 [] \$250,000 [] \$ answered no you begin operations within YOU A MEMBER OF AN ASS YES [] NO (If yes, name and RESENTATIVE BEST QUALIFIE	d you provide services valued in ex, broadcasting stations, commercial is of \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If it the last 12 months? If yes, specifical address of association or group).  IED TO GIVE FURTHER INFORMATITLE	eated outs outlidings	value of any such service 50,000 to public utilities, tran educational institutions, or a side your State? If less than \$ 7 to customers located inside tte? If less than \$50,000, in- outside your State? If less the substitute of the goods described by	es you provided.  Insit systems, Install concerns? If  \$50,000, indicate  It your State who dicate amount.  In \$50,000, indicate  It is the system of the sy	iG?	
B. If you value \$ C. If you news less to the purel \$ F. Did y amou outsi H. Ground I. Did ARE [ ] 11. REPINAM	answered no to 9A and 9B, dispapers, health care institutions han \$50,000, indicate amount, you sell goods valued in excess int. \$ answered no to 9D, did you hased other goods valued in excess you purchase and receive good your state? If less than \$ cost Revenues from all sales or \$100,000 [] \$250,000 [] \$ answered no you purchase and receive good your State? If less than \$ cost Revenues from all sales or \$100,000 [] \$250,000 [] \$ answered no you begin operations within YOU A MEMBER OF AN ASS YES [] NO (If yes, name and RESENTATIVE BEST QUALIFIE	d you provide services valued in ex, broadcasting stations, commercial to sof \$50,000 directly to customers located goods valued in excess of \$50,000 from directly outside ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from ds valued in excess of \$50,000 from \$50,000, indicate amount. \$ performance of services (Check the \$500,000 [] \$1,000,000 or more If the last 12 months? If yes, specifical address of association or group).	eated outs outlidings	value of any such service 50,000 to public utilities, tran educational institutions, or a side your State? If less than \$ 7 to customers located inside tte? If less than \$50,000, in- outside your State? If less the substitute of the goods described by	es you provided.  Insit systems, Install concerns? If  \$50,000, indicate Install your State who dicate amount.  In \$50,000, indicate In \$50,000, indicate In \$50,000 indicate	iG?	

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

# UNITED STATES OF AMERICA BEFORE THE NATIONAL LABOR RELATIONS BOARD

DARREN A FREIHAGE, LLC (MCDONALDS)	
Charged Party	
and	Case 13-CA-252379
(b) (6), (b) (7)(C)	
Charging Party	
AFFIDAVIT OF SERVICE OF CHARGE AGAI	NST EMPLOYER
I, the undersigned employee of the National Labor R November 25, 2019, I served the above-entitled doct following persons, addressed to them at the followin	nment(s) by post-paid regular mail upon the
Darren A Freihage, LLC (McDonalds) 21011 South La Grange Road Frankfort, IL 60423-1335	
November 25, 2019	Denise Gatsoudis, Designated Agent of NLRB
Date	Name
	Is Denise Gatsoudis Signature
	Signature



# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 13 Dirksen Federal Building 219 South Dearborn Street, Suite 808 Chicago, IL 60604-2027

Agency Website: www.nlrb.gov Telephone: (312)353-7570 Fax: (312)886-1341 Download NLRB Mobile App

November 25, 2019



Re: Darren A Freihage, LLC (McDonalds)

Case 13-CA-252379

# $_{\rm Dear}$ (b) (6), (b) (7)(C)

The charge that you filed in this case on November 25, 2019 has been docketed as case number 13-CA-252379. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner Jay B. Greenhill whose telephone number is (312)353-7628 and e-mail address is <u>jay.greenhill@nlrb.gov</u>. If this Board agent is not available, you may contact Supervisory Field Examiner Paul Prokop whose telephone number is (312)353-7171.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

Procedures: Pursuant to Section 102.5 of the Board's Rules and Regulations, parties must submit all documentary evidence, including statements of position, exhibits, sworn statements, and/or other evidence, by electronically submitting (E-Filing) them through the Agency's web site (www.nlrb.gov). You must e-file all documents electronically or provide a written statement explaining why electronic submission is not possible or feasible. Failure to comply with Section 102.5 will result in rejection of your submission. The Region will make its determination on the merits solely based on the evidence properly submitted. All evidence submitted electronically should be in the form in which it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format). If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge.

If the Agency does not issue a formal complaint in this matter, parties will be notified of the Regional Director's decision by email. Please ensure that the agent handling your case has your current email address.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Peter Sung Ohr Regional Director

JBG/dg Enclosure: Copy of Charge 
 From:
 Posey, Sylvia L.

 To:
 (b) (6), (b) (7)(C)

 Subject:
 NLRB Charges

**Date:** Tuesday, December 3, 2019 11:56:00 AM

# Hi (b) (6), (b) (7)(C)

I am the agent assigned to investigate the charges you filed with the National Labor Relations Board. I tried contacting you at the number provided on your charge: (b) (6), (b) (7)(C) However, I was informed that I had the wrong phone number. Please provide a contact number as soon as possible and/or respond to this email. I wanted to discuss scheduling an appointment for you to provide a statement in support of your charges. I can be reached at 312-353-7617.

Sylvia L. Posey



# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 13 Dirksen Federal Building 219 South Dearborn Street, Suite 808 Chicago, IL 60604-2027

Agency Website: www.nlrb.gov Telephone: (312)353-7570 Fax: (312)886-1341

Agent's Direct Dial: (312)353-7617

December 4, 2019

Via Facsimile Regular Mail & Email

(b) (6), (b) (7)(C)

Re: Darren A Freihage, LLC

Case 13-CA-252379

and

Marianos

13-CA-252358

### Dear (b) (6), (b) (7)(C):

As you are aware, I am the Board agent assisting with the investigation of the unfair labor practice charges you filed alleging the Employer has violated Section 8(a)(1) of the Act. I have tried calling you to schedule an appointment for you to provide a sworn statement, but I haven't received a return call. Therefore, this letter is to confirm that I have scheduled an appointment for you to provide a statement on (b) (6), (b) (7)(C) in our office.

Our office is located at Dirksen Federal Building, 219 South Dearborn Street, Suite 808, Chicago, IL 60604-2027.

Your affidavit appointment is scheduled for:

# (b) (6), (b) (7)(C) at the NLRB office listed above

As the Regional Director previously indicated in his letter, it is the Charging Party's obligation to promptly present evidence and its duty to cooperate in this investigation. If you do not timely present the Charging Party evidence, then the charge might be subject to dismissal for lack of cooperation, absent withdrawal. Below is other information you should review prior to coming in for your appointment.

#### **INFORMATION FOR WITNESSES**

#### **Arrive on Time**

Please be prompt for the appointment. If you are running late, please call me at (312) 353-7617.

#### What to Expect

You will meet privately with the Board agent assigned to your case. The Board agent will interview you concerning the allegations in the charge, giving you full opportunity to explain. The Board agent will prepare a written affidavit (sworn statement) for your signature.

### **Documents to Bring (if not already provided)**

- Copy of any work rules.
- Copy of any disciplinary actions.
- Copy of collective bargaining agreement.

### **General Information**

General information about the NLRB and the National Labor Relations Act, including our customer service standards, can be found on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>. We look forward to serving you.

If you fail to appear or you fail to provide the information as scheduled, and you do not contact me to reschedule this appointment in the same week, this office may assume you are not interested in proceeding with this matter and do not intend to cooperate. This may result in dismissal of the case with no further investigation by this Agency.

Please do not hesitate to contact me if you have any questions. My direct dial is (312)353-7617. Thank you for your cooperation.

Very truly yours,

/s/ Sylvia L. Posey Sylvia L. Posey Board Agent From: Posey, Sylvia L.

To: smiller@fisherphillips.com
Subject: NLRB Case 13-CA-252379

**Date:** Monday, December 16, 2019 5:01:00 PM

### Mr. Miller,

I am the agent assigned to investigate case 13-CA-252379. At this time, I am still gathering evidence from the Charging Party. After that process is complete, I will contact you if the Region requires a response from the Employer.

Sylvia L. Posey

Case Name: Darren A Freihage, LLC (McDonalds)

Case No.: 13-CA-252379

Agent: FX Greenhill/ FA Posey

# CASEHANDLING LOG

Date	Person Contacted	Method of Contact	Description of Contact or Activity
11/26/19	(b) (6), (b) (7)(C)	Phone	Called and left a message for
12-2-19			Case reassigned to Posey on 12-2-19
<sup>®®®™</sup> 19	(b) (6), (b) (7)(C)	Phone	Left message for schedule AFF
			returned call. Confirmed that number on charge was dialed number. says number is correct but b is not
			Thanked for informing me and stated that we would take number off our list
1-13-20	(b) (6), (b) (7)(6)	Phone	(b) (5), (b) (6), (b) (7)(C)
1-14-20	(b) (6), (b) (7)(C)	Phone	Says would like to possibly appeal R decision
			Explained that would receive appeal docs and if needed any assistance with filling out could contact me after receipt

Dirksen Federal Building 219 South Dearborn Street, Suite 808 Chicago, IL 60604-2027

Agency Website: www.nlrb.gov Telephone: (312)353-7570 Fax: (312)886-1341

January 15, 2020

(Via email service unless otherwise indicated)

(b) (6), (b) (7)(C)

Re: Darren A Freihage, LLC (McDonalds)

Case 13-CA-252379

Dear (b) (6), (b) (7)(C)

We have carefully investigated and considered your charge that Darren A Freihage, LLC (McDonalds) has violated the National Labor Relations Act.

**Decision to Dismiss:** You have alleged that you were discharged in violation of Section 8(a)(1) of the Act. However, the evidence is insufficient to show that you were coerced, threatened, or restrained because of any protected concerted or union activities in which you may have been engaged.

**Charging Party's Right to Appeal:** The Charging Party may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals.

Means of Filing: You must file your appeal electronically or provide a written statement explaining why electronic submission is not possible or feasible (Written instructions for the NLRB's E-Filing system and the Terms and Conditions of the NLRB's E-Filing policy are available at <a href="www.nlrb.gov">www.nlrb.gov</a>. See <a href="www.nlrb.gov">User Guide</a>. A video demonstration which provides <a href="www.nlrb.gov">step-by-step instructions</a> and <a href="mailto:frequently asked questions">frequently asked questions</a> are also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. If you require additional assistance with E-Filing, please contact <a href="mailto:E-File@NLRB.gov">E-File@NLRB.gov</a>.

You are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect. If you cannot file electronically, please send the appeal and your written explanation of why you cannot file electronically to the General Counsel at the National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001. Unless filed electronically, a copy of the appeal should also be sent to me.

The appeal MAY NOT be filed by fax or email. The Office of Appeals will not process faxed or emailed appeals.

Appeal Due Date: The appeal is due on January 29, 2020. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than January 28, 2020. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal

must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

**Extension of Time to File Appeal:** The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is **received on or before January 29, 2020.** The request may be filed electronically through the *E-File Documents* link on our website <a href="www.nlrb.gov">www.nlrb.gov</a>, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after January 29, 2020, **even if it is postmarked or given to the delivery service before the due date**. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor any claim of confidentiality or privilege or any limitations on our use of appeal statements or supporting evidence beyond those prescribed by the Federal Records Act and the Freedom of Information Act (FOIA). Thus, we may disclose an appeal statement to a party upon request during the processing of the appeal. If the appeal is successful, any statement or material submitted with the appeal may be introduced as evidence at a hearing before an administrative law judge. Because the Federal Records Act requires us to keep copies of case handling documents for some years after a case closes, we may be required by the FOIA to disclose those documents absent an applicable exemption such as those that protect confidential sources, commercial/financial information, or personal privacy interests.

Very truly yours,

/s/ Peter Sung Ohr

Peter Sung Ohr Regional Director

#### Enclosure

cc: Steve A. Miller, Esq.
Fisher & Phillips LLP
10 South Wacker Drive, Suite 3450
Chicago, IL 60606-7592
smiller@fisherphillips.com

Darren A Freihage, LLC (McDonalds) 21011 S La Grange Road Frankfort, IL 60423-1335 (Via first class mail)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

## APPEAL FORM

Date:

To: General Counsel

Attn: Office of Appeals National Labor Relations Board 1015 Half Street SE Washington, DC 20570-0001	
Please be advised that an appeal is here National Labor Relations Board from the action issue a complaint on the charge in	•
Case Name(s).	
Case No(s). (If more than one case number, included taken.)	lude all case numbers in which appeal is
	(Signature)